

## Frequently Asked Questions Regarding GPP, the CHR Council, and the Transition

**Q:** Why is there a Guaranteed Placement Program (GPP)? Aren't there other programs that take care of civilian employees when their organizations are closed because of Base Realignment and Closure (BRAC)?

**A:** The concept of the GPP was created in response to a concern that the quality of care to warriors at Walter Reed Army Medical Center (WRAMC) would be affected because civilian employees would seek employment elsewhere before the facility closed. The Honorable Gordon England, Deputy Secretary of Defense, signed a letter that directed the development of "a plan to maximize placement of WRAMC employees affected by the transfer of healthcare services under the BRAC process to the National Naval Medical Center (NNMC) and DeWitt Army Community Hospital. This program will provide a "Guaranteed Placement Program" for all WRAMC employees to transfer to the new Walter Reed National Military Medical Center at Bethesda or the new Community Hospital at Fort Belvoir, and will serve as an incentive for continued employment at WRAMC up to, and including, its closure." There are other excellent programs that take care of civilian employees who are displaced by BRAC but the creation of the GPP is intended to place special focus on the need to retain a skilled workforce at WRAMC and to secure placement as we transition through BRAC.

**Q:** Does the Guaranteed Placement Program (GPP) cover all civilian employees at military treatment facilities in the National Capital Region including the clinics?

**A:** The GPP covers personnel assigned to Walter Reed Army Medical Center and some activities in direct support of the hospital affected by the transfer of health care services under BRAC. That said, the role of the CHR Council will be to ensure that the GPP is carried out in a way that considers the best interest of the entire medical civilian workforce across the region.

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**Q:** How does the GPP fit with the overall transition to Walter Reed National Military Medical Center and the new Community Hospital at Fort Belvoir when they are completed in 2011?

**A:** One of the primary goals of this transition is to create a premier integrated health delivery system in the region. The achievement of that goal is linked directly to our ability to maintain our civilian workforce while we transition from WRAMC and join the work forces at the newly expanded Bethesda facility and the new facility at Fort Belvoir.

**Q:** What does “phased transition” mean?

**A:** There will be many changes associated with the movement from the four military hospitals in the region to two inpatient hospitals in 2011. As you are probably aware, clinical integration is ongoing and there will be many changes in administrative processes as well. The CHR Council will be identifying changes and transitions that can be planned and/or accomplished before the final move to ensure that, to the maximum extent possible, employees’ preferences are considered.

**Q:** If I am an employee at NNMC or DeWitt, will I lose my current job because of the GPP?

**A:** No, not as part of the GPP. No one will lose their jobs to make a vacancy for someone who is coming from WRAMC. The wording within the DEPSECDEF memo of 29 Aug 2007 provides assurances of continued employment to those at WRAMC, but does not intend to do that at the expense of the employees at NNMC and FBCH.

Additional information about the transition and the future medical civilian workforce in the NCR will be posted on [www.JTFCAPMED.mil](http://www.JTFCAPMED.mil).